

| MULTIPLE DEPENDENT CLAIM<br>FEE CALCULATION SHEET |          |     |                     |     |                     |     | SERIAL NO.   | FILING DATE |
|---|----------|-----|---------------------|-----|---------------------|-----|--------------|-------------|
|   |          |     |                     |     |                     |     | APPLICANT(S) |             |
| CLAIMS  |          |     |                     |     |                     |     |              |             |
|   | AS FILED |     | AFTER 1ST AMENDMENT |     | AFTER 2ND AMENDMENT |     |              |             |
|   | IND      | DEP | IND                 | DEP | IND                 | DEP | IND          | DEP         |
| 1   |          |     |                     |     |                     |     | 51           |             |
| 2   |          |     |                     |     |                     |     | 52           |             |
| 3   |          |     |                     |     |                     |     | 53           |             |
| 4   |          |     |                     |     |                     |     | 54           |             |
| 5   |          |     |                     |     |                     |     | 55           |             |
| 6   |          |     |                     |     |                     |     | 56           |             |
| 7   |          |     |                     |     |                     |     | 57           |             |
| 8   |          |     |                     |     |                     |     | 58           |             |
| 9   |          |     |                     |     |                     |     | 59           |             |
| 10  |          |     |                     |     |                     |     | 60           |             |
| 11  |          |     |                     |     |                     |     | 61           |             |
| 12  |          |     |                     |     |                     |     | 62           |             |
| 13  |          |     |                     |     |                     |     | 63           |             |
| 14  |          |     |                     |     |                     |     | 64           |             |
| 15  |          |     |                     |     |                     |     | 65           |             |
| 16  |          |     |                     |     |                     |     | 66           |             |
| 17  |          |     |                     |     |                     |     | 67           |             |
| 18  |          |     |                     |     |                     |     | 68           |             |
| 19  |          |     |                     |     |                     |     | 69           |             |
| 20  |          |     |                     |     |                     |     | 70           |             |
| 21  |          |     |                     |     |                     |     | 71           |             |
| 22  |          |     |                     |     |                     |     | 72           |             |
| 23  |          |     |                     |     |                     |     | 73           |             |
| 24  |          |     |                     |     |                     |     | 74           |             |
| 25  |          |     |                     |     |                     |     | 75           |             |
| 26  |          |     |                     |     |                     |     | 76           |             |
| 27  |          |     |                     |     |                     |     | 77           |             |
| 28  |          |     |                     |     |                     |     | 78           |             |
| 29  |          |     |                     |     |                     |     | 79           |             |
| 30  |          |     |                     |     |                     |     | 80           |             |
| 31  |          |     |                     |     |                     |     | 81           |             |
| 32  |          |     |                     |     |                     |     | 82           |             |
| 33  |          |     |                     |     |                     |     | 83           |             |
| 34  |          |     |                     |     |                     |     | 84           |             |
| 35  |          |     |                     |     |                     |     | 85           |             |
| 36  |          |     |                     |     |                     |     | 86           |             |
| 37  |          |     |                     |     |                     |     | 87           |             |
| 38  |          |     |                     |     |                     |     | 88           |             |
| 39  |          |     |                     |     |                     |     | 89           |             |
| 40  |          |     |                     |     |                     |     | 90           |             |
| 41  |          |     |                     |     |                     |     | 91           |             |
| 42  |          |     |                     |     |                     |     | 92           |             |
| 43  |          |     |                     |     |                     |     | 93           |             |
| 44  |          |     |                     |     |                     |     | 94           |             |
| 45  |          |     |                     |     |                     |     | 95           |             |
| 46  |          |     |                     |     |                     |     | 96           |             |
| 47  |          |     |                     |     |                     |     | 97           |             |
| 48  |          |     |                     |     |                     |     | 98           |             |
| 49  |          |     |                     |     |                     |     | 99           |             |
| 50  |          |     |                     |     |                     |     | 100          |             |
| TOTAL IND.  | 1        |     |                     |     |                     |     | TOTAL IND.   |             |
| TOTAL DEP.  | 9        |     |                     |     |                     |     | TOTAL DEP.   |             |
| TOTAL CLAIMS                                      | 10       |     |                     |     |                     |     | TOTAL CLAIMS |             |